Fill in this in	formation to identify	your case and this filir	ng:
Debtor 1	JoAnn First Name	Middle Name	White Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	Western District of Pe	nnsylvania
Case number	18-24394		_

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

	s. Where is the property?	What is the property? Check all that apply. ☐ Single-family home	Do not deduct secured cla	d claims on Schedule D
1.1.	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative	Current value of the	Current value of t
		Manufactured or mobile homeLand	entire property?	portion you own? \$
	City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	of your ownership simple, tenancy by
		Who has an interest in the property? Check one.		
	County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Check if this is co	emmunity property
		_	(see instructions)	
VOII.	own or have more than one list here:	At least one of the debtors and another Other information you wish to add about this ite property identification number:	em, such as local	
.2.	own or have more than one, list here:	At least one of the debtors and another Other information you wish to add about this ite	em, such as local	d claims on Schedule L
.2.	own or have more than one, list here: Street address, if available, or other description	At least one of the debtors and another Other information you wish to add about this ite property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cla	d claims on Schedule I ms Secured by Property
.2.		At least one of the debtors and another Other information you wish to add about this ite property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	d claims on Schedule Ins Secured by Property Current value of t
.2.		At least one of the debtors and another Other information you wish to add about this ite property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	d claims on Schedule Ins Secured by Propert Current value of the portion you own? \$
1.2.	Street address, if available, or other description	At least one of the debtors and another Other information you wish to add about this its property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? Describe the nature cinterest (such as fee	d claims on Schedule in Secured by Propert Current value of portion you own? \$
1.2.	Street address, if available, or other description	At least one of the debtors and another Other information you wish to add about this ite property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? Describe the nature cinterest (such as fee	d claims on Schedule Ins Secured by Propert Current value of the portion you own? \$

Official Form 106A/B Schedule A/B: Property page 1

1.3.	Street address, if available	e, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property.
			☐ Condominium or cooperative ☐ Manufactured or mobile home	entire property?	portion you own?
			Land	\$	\$
			☐ Investment property		
	City	State ZIP Code	☐ Timeshare	Describe the nature of interest (such as fee	
			☐ Other	the entireties, or a life	
			Who has an interest in the property? Check one.		
			Debtor 1 only		
	County		Debtor 2 only		
			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			At least one of the debtors and another	(see instructions)	
ld t	he dollar value of the r	portion you own for a	property identification number: Il of your entries from Part 1, including any entries		
			here		\$
2:	Describe Your \	/ehicles			
ou d own	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year:	al or equitable interes	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only		aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
ou o own ars, l	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make:	al or equitable interes s. If you lease a vehicl sport utility vehicles Dodge Caravan 2002	e, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
ou o wn ars, l N	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage:	al or equitable interes s. If you lease a vehicl sport utility vehicles Dodge Caravan 2002	e, also report it on Schedule G: Executory Contracts and specific property? Check one. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. Current value of th e
ou down ars, N Y	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage:	al or equitable interes s. If you lease a vehicles sport utility vehicles Dodge Caravan 2002 180000	e, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of th portion you own?
ou down ars, N Y	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage: Other information:	al or equitable interes s. If you lease a vehicles sport utility vehicles Dodge Caravan 2002 180000	e, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured cla	aims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property.</i> Current value of th portion you own? \$1,385.00
ou down ars, ars, N	bwn, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage: Other information:	al or equitable interes s. If you lease a vehicles sport utility vehicles Dodge Caravan 2002 180000	e, also report it on Schedule G: Executory Contracts and another Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. Current value of th portion you own? \$1,385.00 aims or exemptions. Put d claims on <i>Schedule D:</i>
ou down ars, N Y	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model:	al or equitable interes s. If you lease a vehicles sport utility vehicles Dodge Caravan 2002 180000	e, also report it on Schedule G: Executory Contracts and interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$1,385.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
ou down ars, N Y	bwn, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model: Year:	al or equitable interes s. If you lease a vehicles sport utility vehicles Dodge Caravan 2002 180000	e, also report it on Schedule G: Executory Contracts and another who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure creditors who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$1,385.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
ou down ars, N Y	own, lease, or have leg that someone else drive vans, trucks, tractors, o es Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model:	al or equitable interes s. If you lease a vehicles sport utility vehicles Dodge Caravan 2002 180000	e, also report it on Schedule G: Executory Contracts and interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$1,385.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the

3.3.		Who has an interest in the meanury 2 of	5	
J.J.	Make:	Who has an interest in the property? Check one.		aims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Other information.	☐ Check if this is community property (see	\$	\$
		instructions)		
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Current value of the entire property?	portion you own?
	Approximate mileage:	At least one of the debtors and another		
	Other information:	☐ Check if this is community property (see	\$	\$
		instructions)		
xar	nples: Boats, trailers, motors, personalo	s and other recreational vehicles, other vehicles, and accessal watercraft, fishing vessels, snowmobiles, motorcycle accesso		
ixar 1 N 1 Y	nples: Boats, trailers, motors, persona lo 'es			aims or exemptions. Put
ixar I N	nples: Boats, trailers, motors, personalo fes Make:	al watercraft, fishing vessels, snowmobiles, motorcycle accesso	Do not deduct secured cla	d claims on Schedule D:
xar l N	nples: Boats, trailers, motors, personalo des Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla	d claims on Schedule D:
xar l N	nples: Boats, trailers, motors, personalo fes Make:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla	d claims on Schedule D:
kar l N l Y	nples: Boats, trailers, motors, personalo fes Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property. Current value of th
Xarr	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$
⊠ N □ Y	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check one. Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$
i.1. you	mples: Boats, trailers, motors, personal of the second of	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check if this is community property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure	d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$
you	mples: Boats, trailers, motors, personal lo fes Make: Model: Year: Other information: u own or have more than one, list here Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check one. Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$

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JoAnn First Name Debtor 1 Middle Name

Part 3:

Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No	
	X Yes. Describe See Attachment 1	\$640.00
		φ <u>υ+υ.υυ</u>
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No	
	Yes. Describe	\$ <u>157.00</u>
_		
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	
	Yes. Describe	\$
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
	and kayaks; carpentry tools; musical instruments	
	□ No	
	Yes. Describeweight bench (\$50)	\$50.00
		\$50.00
10	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	No	
	Yes. Describe	\$
		Ψ
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	
	Yes. DescribeDebtor's Clothes	\$600.00
		T
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	No Costume Jewelry	+2F 00
	Yes. Describe	<u>\$25.00</u>
13	Non-farm animals	1
13.	Examples: Dogs, cats, birds, horses	
	No No	1
	Yes. Describe	\$
14.	Any other personal and household items you did not already list, including any health aids you did not list	1
	X No	
	Yes. Give specific	1 .
	information	\$
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$ <u>1,472.00</u>
	for Part 3. Write that number here	

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JoAnn First Name

Debtor 1

Middle Name

Part 4:

Describe Your Financial Assets

Do	you own or have any le	egal or equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash Examples: Money you h	ave in your wallet, in your hom	e, in a safe deposit box, and on hand when you fil	e your petition	
				Cash:	\$5.00
	and other sin		nts; certificates of deposit; shares in credit unions, ultiple accounts with the same institution, list each		
	□ No ☑ Yes		Institution name:		
		17.1. Checking account:	Huntington Bank		\$0.00
		17.2. Checking account:			\$
		17.3. Savings account:	Huntington Bank		<u>\$1.00</u>
		17.4. Savings account:			\$
		17.5. Certificates of deposit:			\$
		17.6. Other financial account:			\$
		17.7. Other financial account:			\$
		17.8. Other financial account:			\$
		17.9. Other financial account:			\$
1		Institution or issuer name:	erage firms, money market accounts		
	an LLC, partnership, a	nd joint venture	rated and unincorporated businesses, includin	g an interest in	
	X NoYes. Give specific	Name of entity:		% of ownership:	
	information about them				\$ \$
					\$

20. Government and corporate bonds and other negotiable instruments include personal checks, cash Non-negotiable instruments are those you cannot transport to the contract of the contract	iers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot tran	
	ster to someone by signing or delivering them.
☑ No	
☐ Yes. Give specific	
information about them	\$
	\$
·	\$
21. Retirement or pension accounts	
	3(b), thrift savings accounts, or other pension or profit-sharing plans
☐ No ☑ Yes. List each	
	on name:
401(k) or similar plan:	\$
	·
IRA:	\$
Retirement account:	\$
Keogh:	\$
Additional account:	\$
Additional account:	\$
Your share of all unused deposits you have made so t Examples: Agreements with landlords, prepaid rent, p companies, or others	
X No	
	ame or individual:
Electric:	
Gas:	φ
Heating oil:	5
-	\$
Prepaid rent:	\$
Telephone:	\$
Water:	\$
Rented furniture:	
Other:	
	 \$
	to you gith or for life or for a number of warm
On Ameritian (A contract for a contract (
	to you, entitle for the a number of years)
XI No	to you, entitle for the a number of years)
	to you, either for life or for a number of years)

JoAnn First Name Debtor 1 Middle Name

24.	26 U.S.C. §§ 530(b)(1), 529A(b),		punt in a qualified ABLE program, or under a qualified state $b)(1)$.	te tuition program.	
	No No				
	YesIns	nstitution r	name and description. Separately file the records of any interest	ests.11 U.S.C. § 521(c	:):
	_				\$
					\$
					\$
					
25.	Trusts, equitable or future intere exercisable for your benefit	rests in p	roperty (other than anything listed in line 1), and rights or	powers	
	☑ No				_
	Yes. Give specific				Φ.
	information about them				\$
26.	Examples: Internet domain names		secrets, and other intellectual property es, proceeds from royalties and licensing agreements		
	No Transfer of the second of t				7
	Yes. Give specific information about them				\$
27.	Licenses, franchises, and other <i>Examples</i> : Building permits, exclu	_	intangibles nses, cooperative association holdings, liquor licenses, profes	sional licenses	
	☑ No				_
	☐ Yes. Give specific				•
	information about them				\$
Мс	oney or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	Tax refunds owed to you				
20.	□ No				
	Yes. Give specific information	า	State tax refund	Fadarah	\$0.00
	about them, including wh	hether			\$120.00
	you already filed the retu and the tax years				
	,			Local:	\$0.00
29.	Family support	alimony	spousal support, child support, maintenance, divorce settlem	ant proporty acttleme	nt
	No	i aiiiiiUliy,	spousai support, orina support, maintenance, divorce settlem	стк, ргорену зешетте	in.
	Yes. Give specific information	2			
	res. Give specific information	I		Alimony:	\$
				Maintenance:	\$
				Support:	\$
				Divorce settlement:	\$
				Property settlement:	\$
20		VOLL			
	Other amounts someone owes				
30.	Social Security benefit	lity insura	nce payments, disability benefits, sick pay, vacation pay, word loans you made to someone else	kers' compensation,	
30.	Examples: Unpaid wages, disabili Social Security benefit No	lity insura its; unpaid	d loans you made to someone else	kers' compensation,	
30.	Examples: Unpaid wages, disabili Social Security benefit	lity insura its; unpaid	d loans you made to someone else	kers' compensation,	\$

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| Debtor 1 | JoAnn | White Document | Page 8 of 11/29/18 |

	\$
	\$
	Ψ
32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive	
property because someone has died.	
☑ No	
Yes. Give specific information	
	\$
 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No 	
Yes. Describe each claim	
	\$Unknown
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☑ No ☐ Yes. Describe each claim	\$
35. Any financial assets you did not already list No Yes. Give specific information	\$
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$ <u>5</u> 84.00
_	\$584.00
_	
for Part 4. Write that number here	
for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any I	
for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any 1 37. Do you own or have any legal or equitable interest in any business-related property?	
for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any II 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.	
for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any II 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.	current value of the portion you own?
for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any II 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.	Current value of the portion you own? Do not deduct secured claims
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any II 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38.	current value of the portion you own?
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any I 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. 38. Accounts receivable or commissions you already earned	Current value of the portion you own? Do not deduct secured claims
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any II 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38.	Current value of the portion you own? Do not deduct secured claims
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any I 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. 38. Accounts receivable or commissions you already earned	Current value of the portion you own? Do not deduct secured claims
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any II 37. Do you own or have any legal or equitable interest in any business-related property? \[\sum \text{No. Go to Part 6.} \] \[\sum \text{Yes. Go to line 38.} \] 38. Accounts receivable or commissions you already earned \[\sum \text{No.} \] \[\sum \text{Yes. Describe} \]	Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any II 37. Do you own or have any legal or equitable interest in any business-related property? \[\textstyle{\textstyle{\textstyle{1}}} \text{ No. Go to Part 6.} \] \[\textstyle{\text{ Yes. Go to line 38.}} \] 38. Accounts receivable or commissions you already earned \[\textstyle{\text{ No}} \] \[\text{ Yes. Describe} \] 39. Office equipment, furnishings, and supplies	Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any	Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any	Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any	Current value of the portion you own? Do not deduct secured claims or exemptions.

40. Machinery, fixtures, e	quipment, supplies you use in business, and tools of your trade		
No No			1
☐ Yes. Describe			\$
L			
41. Inventory			
☑ No]
Yes. Describe			\$
_			-
42. Interests in partnersh	ips or joint ventures		
No			
☐ Yes. Describe	Name of entity:	% of ownership:	
		%	\$
		%	\$
		%	\$
43. Customer lists, mailin	g lists, or other compilations		
X No			
	include personally identifiable information (as defined in 11 U.S.C. § 101(41A)))?	
∑ No			1
Yes. Desc	ribe		\$
	property you did not already list		
No Yes. Give specific			
information			\$
			\$
			\$
			\$
			\$
			\$
			¥
	of all of your entries from Part 5, including any entries for pages you have att number here		\$0.00
Tor i are o. write that i			
Part 6: Describe A	ny Farm- and Commercial Fishing-Related Property You Own or Ha	ve an Interest In	
If you own or	have an interest in farmland, list it in Part 1.		
5			
No. Go to Part 7.	ny legal or equitable interest in any farm- or commercial fishing-related prop	erty?	
Yes. Go to line 47.			
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
47. Farm animals			
Examples: Livestock, p	oultry, farm-raised fish		
⊠ No			1
☐ Yes			
			\$

48. Crops—either growing or harvested			
☐ Yes. Give specific information			\$
49. Farm and fishing equipment, implements, machinery, fixtures,	and tools of trade		1
☐ Yes			\$
50. Farm and fishing supplies, chemicals, and feed			
№ No			\$
51. Any farm- and commercial fishing-related property you did not	t already list		J
■ No ■ Yes. Give specific information			\$
52. Add the dollar value of all of your entries from Part 6, includin for Part 6. Write that number here		_	\$0.00
Part 7: Describe All Property You Own or Have a	n Interest in That	You Did Not List Above	
53. Do you have other property of any kind you did not already lise Examples: Season tickets, country club membership	et?		
No Yes. Give specific			\$
information			\$
			\$
54. Add the dollar value of all of your entries from Part 7. Write that	at number here		\$
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$ <u>0.00</u>
56. Part 2: Total vehicles, line 5	\$ <u>1,385.00</u>	_	
57. Part 3: Total personal and household items, line 15	\$ <u>1,472.00</u>	-	
58. Part 4: Total financial assets, line 36	\$ <u>584.00</u>	_	
59. Part 5: Total business-related property, line 45	\$0.00	_	
60. Part 6: Total farm- and fishing-related property, line 52	\$ <u>0.00</u>	_	
61. Part 7: Total other property not listed, line 54	+ \$0.00	-	
62. Total personal property. Add lines 56 through 61	\$3,441.00	Copy personal property total	+ \$3,441.00
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$3,441.00

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Attachment Debtor: JoAnn White Case No: 18-24394

Attachment 1

3 beds (\$100), 1 dresser (\$25), 1 nightstand (\$10), 1 mirror (\$5), 1 kitchen table and chair set (\$50), 1 desk (\$25), 1 piece of luggage (\$15), 1 coffee maker (\$10), 1 blender (\$20), 1 toaster (\$5), 1 popcorn popper (\$5), 1 electric can opener (\$5), 4 other small appliances (\$100), 1 set of pots and pans (\$25), 1 set of dishes (\$5), 1 set of glasses (\$20), 1 set of tableware (\$20), 1 washer (\$50), 1 dryer (\$50), 1 refrigerator (\$75), 1 microwave (\$20)

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			Ocument	T auc 12
Fill in this in	formation to iden	tify your case:		
Debtor 1	JoAnn White			
200101	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	the: Western District of	Pennsylvania	
Case number (If known)	18-24394			

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

2. For any property you list on Schedule A/B t	nat you claim as exem	pt, fill in the information below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief Cash on Hand description: Line from Schedule A/B: 16	\$5.00	\$ 5.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief Household Goods and description: Furnishings Line from Schedule A/B: 6	\$ <u>6</u> 40.00	\$ 640.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(1)
Brief Debtor's Clothes description: Line from Schedule A/B: 11	\$600.00	\$ 600.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
	years after that for case	any applicable statutory limit	t.)

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Debtor 1

JoAnn White

Middle Name

Last Name

Document Page 13 of 58 number (if known) 18-24394

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	1
Brief 2002 Dodge Caravan with description: 180000 miles. Line from Schedule A/B: 3.1	\$1,385.00	\$\frac{1,385.00}{100\% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(2)
Brief Debtor Jewelry description:	\$25.00	A \$ <u>25.00</u>	11 USC § 522(d)(4)
Line from Schedule A/B: 12		☐ 100% of fair market value, up to any applicable statutory limit	
Brief Electronics description:	<u>\$157.00</u>	X \$ 157.00	11 USC § 522(d)(3)
Line from Schedule A/B: 7		☐ 100% of fair market value, up to any applicable statutory limit	
Brief Sports / Hobby Equipment description:	\$50.00	☒ \$ <u>50.00</u> □ 100% of fair market value, up to	11 USC § 522(d)(5)
Line from Schedule A/B: 9		any applicable statutory limit	
Brief Debtor Checking Account description:	\$0.00	\$\\ 0.00 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	11 USC § 522(d)(5)
Schedule A/B: 17.1		any applicable statutory limit	
Brief Debtor Savings Account description:	<u>\$1.00</u>	X \$ 1.00	11 USC § 522(d)(5)
Line from Schedule A/B: 17.3		☐ 100% of fair market value, up to any applicable statutory limit	
Brief Debtor Pension Plan description:	\$ <u>458.00</u>	X \$ <u>458.00</u>	11 USC § 522(d)(10)(E)
Line from Schedule A/B: 21		☐ 100% of fair market value, up to any applicable statutory limit	
Brief Debtor State Tax Refund description:	\$ <u>120.00</u>	X \$ 120.00	11 USC § 522(d)(5)
Line from Schedule A/B: 28		☐ 100% of fair market value, up to any applicable statutory limit	
Brief Product Liability claim description:	\$Unknown	X \$ Unknown	11 USC § 522(d)(5)
Line from Schedule A/B: 33		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this in	formation to identify	your case:		
Debtor 1	JoAnn White			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	Western District of	Pennsylvania	
Case number (If known)	18-24394			

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - M No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column Course Unsecure portion If any
]	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name]		
Number Street	-			
Trained Circle	As of the date you file, the claim is: Check all that apply.	_		
	Contingent			
	☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
7 or 1 was 12 14 4	Other (including a right to offset)	-		
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
l l l l l l l l l l l l l l l l l l l				
<u></u>	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Newshar	-			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City Chair 7ID Code	☐ Contingent ☐ Unliquidated			
City State ZIP Code	Contingent			
City State ZIP Code Who owes the debt? Check one.	☐ Contingent ☐ Unliquidated			
Who owes the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed			
Who owes the debt? Check one.	□ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan)			
Who owes the debt? Check one. Debtor 1 only	 □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) 			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only	 □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit 			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	 □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) 	_		
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	 □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit 	-		
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	 □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit 	-		

Case 18-24394-TPA Doc 10 Filed 11/29/18 Entered 11/29/18 15:11:17 Fill in this information to identify your case: JoAnn Debtor 1 Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Western District of Pennsylvania Check if this is an Case number <u>18-24394</u> amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount amount 2.1 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only Domestic support obligations ☐ At least one of the debtors and another ☐ Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify ☐ No Yes 2.2 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations ☐ Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another ☐ Claims for death or personal injury while you were ☐ Check if this claim is for a community debt

☐ No☐ Yes

Is the claim subject to offset?

intoxicated

Other, Specify

Debtor 1	Caşe _A 1,8-2	4394-TPA	Doc 10 _{Wh} Feiled 11/29/18 Entered 11/29/18 15:11:17 Desc Main Last Name Document Page 16 of 58	
	First Name	Middle Name	Last Name Document Page 16 of 58	
Part 2	List All of	Your NONPR	ORITY Unsecured Claims	

Pa	List All of Your NONPRIORITY Unsecured Claims		
	Do any creditors have nonpriority unsecured claims against you' No. You have nothing to report in this part. Submit this form to the Yes		
	List all of your nonpriority unsecured claims in the alphabetical or priority unsecured claim, list the creditor separately for each claim. Fo included in Part 1. If more than one creditor holds a particular claim, lifill out the Continuation Page of Part 2.	r each claim listed, identify what type of claim it is. Do not list	claims already
			Total claim
4.1	Allergy and Asthma Care Center - Barry J. Asman, M.D.	Last 4 digits of account number 0 8 9 1	\$80.00
	Nonpriority Creditor's Name 2550 Mosside Blvd., Suite 202 Number Street	When was the debt incurred? July - December 2017	Ψ
	Monroeville PA 15146		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts	
	™ No	Medical Services Medical Services	
	☐ Yes		
4.2	Ashworth College c/o Ability Recovery Service Nonpriority Creditor's Name	Last 4 digits of account number 6 2 N 1 When was the debt incurred?	\$762.00
	PO Box 4031		
	Wumber Street Wyoming PA 18644 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Student loans☐ Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts	
	∑ No	Other. Specify	
	☐ Yes		
4.3	Charles Johnson	Local Addition of control of	
	Charles Johnson Nonpriority Creditor's Name	Last 4 digits of account number	\$5,000.00
	1827 Bedford Avenue	When was the debt incurred?	
	Number Street		
	Pittsburgh PA 15219	As of the date you file the claim is. Check all that apply	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another		
	☐ Check if this claim is for a community debt	Student loans	
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	X No □ Yes	M Other. Specify personal loan	
	■ Yes		

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Part 2:	Your	NO

NPRIORITY Unsecured Claims —Continuation Page

Afte	r listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
4.4	Citizens Bank Convergent	Last 4 digits of account number 7 4 5 9	\$ <u>1,100.00</u>
	Nonpriority Creditor's Name SW 39th Street	When was the debt incurred?	
	Number Street Renton WA 98057	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only☑ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	X No Yes		
4.5	CNAC/COS	Last 4 digits of account number _195	\$ <u>11,403.00</u>
	Nonpriority Creditor's Name 12802 Hamilton Crossing Blvd.	When was the debt incurred? 6/2007	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Carmel IN 46032 City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	■ Yes	Other. Specify	
4.6	Convergent Outsourcing, Inc./RBS Citizens, N.A.	Last 4 digits of account number 7 4 5 9	\$ <u>164.35</u>
	Nonpriority Creditor's Name P.O. Box 1022	When was the debt incurred?	
	Number Street Wixom MI 48393-1022	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? No Yes	Other. Specify Credit Card Charges	

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Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them beginning with	a 4.5, followed by 4.6, and so forth.	Total claim
4.7	Credit Acceptance	Last 4 digits of account number 8 0 1 9	\$ <u>6,647.00</u>
	Nonpriority Creditor's Name PO Box 5070	When was the debt incurred? 5/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Southfield MI 48086 City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	■ Debtor 1 only □ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	X No	Other. Specify	
	☐ Yes		
4.8	Credit Acceptance Corporation Nonpriority Creditor's Name	Last 4 digits of account number X X 6 8	\$ <u>4,587.00</u>
	25505 W 12 Mile Road	When was the debt incurred? 5/11/2015	
	Number Street Southfield MI 48034	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specifyauto loan	
	XI No ☐ Yes	Officer: Specify auto roars	
4.9			_{\$} 1,215.23
	Duquesne Light Company Nonpriority Creditor's Name	Last 4 digits of account number0 _0 _0	
	411 Seventh Avenue (6-2) Number Street	When was the debt incurred?	
	Pittsburgh PA 15219	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims	
	Is the claim subject to offset?	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specifyutility services	
	XI No □ Yes		

	art 2:	Your NONPRIORITY	Unsecured	Claims	-Continuation	Pag
--	--------	------------------	-----------	---------------	---------------	-----

Last 4 digits of account number 4 2 8 7 \$30.00	Afte	r listing any entries on this page, number them beginning with 4.5	5, followed by 4.6, and so forth.	Total claim
PO Box 643289	4.10		-	\$30.00
Pittsburgh		PO Box 643259	When was the debt incurred? 2007-2018	
Who incurred the debt? Check one. 2 Debtor 1 and Pebtor 2 only Debtor 2 only Debtor 1 and Pebtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debt			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Disputed				
Debtor 2 only			1	
At least one of the debtors and another		_ ,	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt is the claim subject to offset? Sate			☐ Student loans	
Debts to pension or profit-sharing plans, and other similar debts		At least one of the debtors and another		
Is the claim subject to offset? A1.11 Enterprise Rent-A-Car Nonporonty Creditor's Name Cof. AR Resources, Inc. PO Box 1056 Number Street Stre		☐ Check if this claim is for a community debt		
A.11 Enterprise Rent-A-Car Narpromy Creator's Name C/o AR Resources, Inc. PO Box 1056 Number Steet Blue Bell PA 19422 City State ZIP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 8 Avenue Number Steet Number Steet Note Resources, Inc. PO Box 1056 Number Steet Who incurred the debt? Check one. Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Number Steet Pittsburgh PA 15219 City State ZiP Code Who incurred the debtors and another Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 2 only Debtor 3 only 4 the 4 digits of account number 1 5 5 6 Sa of the date you file, the claim is: Check all that apply. State 4 digits of account number 2 5 8 8 When was the debt incurred? As of the date you file, the claim is: Check all that apply. State 4 digits of account number 2 5 8 8 When was the debt incurred? As of the date you file, the claim is: Check all that apply. State 4 digits of account number 2 5 8 8 When was the debt incurred? As of the date you file, the claim is: Check all tha		Is the claim subject to offset?		
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When was the debt incurred? Number Street				ψ <u>σ</u>
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Who incurred the debt? Check one. Disputed			☐ Contingent	
Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts Student loans Debts to pension or profit-sharing plans, and other similar debts		Who incurred the debt? Check are	·	
Debtor 2 only			☐ Disputed	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another				
Debts to pension or profit-sharing plans, and other similar debts		☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Is the claim subject to offset? No		☐ Check if this claim is for a community debt	_	
## A 15219 City State ZIP Code Contingent Cont		Is the claim subject to offset?		
Last 4 digits of account number 2 5 8 8 \$35.00				
Nonpriority Creditor's Name 1835 Forbes Avenue Number Street Pittsburgh PA 15219 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? 4/21/2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services	1.12			\$35.00
1835 Forbes Avenue Number Street Pittsburgh PA 15219 City State ZIP Code Contingent Unliquidated Disputed			Last 4 digits of account number _2388	
Pittsburgh PA 15219 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Services			When was the debt incurred? 4/21/2016	
Pittsburgh PA 15219 City State ZIP Code Contingent Unliquidated Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Unliquidated ☐ Disputed ☐ Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical Services ☐ Other. Specify Medical Services			_	
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Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services Other. Specify Medical Services				
XI No		•	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes		XI No	Other. Specify Ivieuical Services	

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Part 2: Your NONPRIORITY Unsecured Claims —Continuation Page

listing any entries on this page, number them beginning with	th 4.5, followed by 4.6, and so forth.	Total cla
	0 0 4 5	
Exeter Finance Corp	Last 4 digits of account number 6 8 4 5	\$7,939.00
Nonpriority Creditor's Name		
PO Box 166097	When was the debt incurred? $10/2010$	
Number Street	As of the date you file the claim in Charle II that and	
rving TX 75016	As of the date you file, the claim is: Check all that apply.	
Dity State ZIP Code	Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
☐ At least one of the debtors and another	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
- the elein enhice the effect0	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify	
X No		
Yes		
	4 2 6 4	
Exeter Finance Corp c/o Calvary Portfolio Service	Last 4 digits of account number 1 2 6 1	\$ <u>6,220.0</u>
Nonpriority Creditor's Name		
500 Summit Lake Drive	When was the debt incurred? 12/2015	
Number Street		
/alhalla NY 10595	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
State 211 Gode	☐ Unliquidated	
Who incurred the debt? Check one.	•	
	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Chack if this slaim is far a community dabt	you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	M Other Specify	
X No	_ oo opeo,	
⊒ Yes		
		_{\$} 383.26
- ast Loan at Dollar Smart	Last 4 digits of account number <u>X</u> <u> <u>5</u> <u>7</u> </u>	φ <u>σσσ.20</u>
Nonpriority Creditor's Name		
c/o AAS Debt Recovery, Inc. PO Box 129	When was the debt incurred? 1/16/2018	
Number Street	As of the date was 60 of a last to 50 of a las	
Monroeville PA 15146	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	—	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
•	☐ Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify Personal Loan	
XI No		

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Part 2: You

Your NONPRIORITY Unsecured Claims —Continuation Page

Afte	r listing any entries on this page, number them beginning with 4	.5, followed by 4.6, and so forth.	Total claim
4.16	Giant Eagle SMKT60 c/o Encircle Collections, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 1 6 3 4	\$43.00
	1691 NW 107th Avenue	When was the debt incurred? 8/2015	
	Number Street Doral FL 33172	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only☑ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specifyunknown	
	XI No ☐ Yes	March of the Control	
4.17	Greater Pittsburgh Orthapedic Nonpriority Creditor's Name	Last 4 digits of account number 3 9 6 6	\$80.00
	PO Box 3485	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Pittsburgh PA 15230 City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	🚨 Debtor 1 only	Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. SpecifyMedical Services	
	☑ No □ Yes		
4.18	James Wojcicki	Last 4 digits of account number	\$5,688.00
	Nonpriority Creditor's Name	When was the debt incurred? 7/30/2009	
	2543 Graham Boulevard Number Street		
	Pittsburgh PA 15235	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	■ Debtor 1 only ■ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify See Attachment 1	
	☐ Yes		

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Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
4.19	Jason White	Last 4 digits of account number	\$ <u>1,500.00</u>
	Nonpriority Creditor's Name 2124 Beulah Road	When was the debt incurred?	
	Number Street Pittsburgh PA 15235	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Debts to pension or profit-snaring plans, and other similar debts Other. SpecifyCar	
4.20	Montgomery Ward	Last 4 digits of account number 0 2 9 0	\$ <u>40.78</u>
	Nonpriority Creditor's Name 1112 7th Avenue	When was the debt incurred?	
	Number Street Monroe WI 53566	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	☑ Debtor 1 only☑ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts M Other. Specify Credit Card Charges	
	X NoYes	Other. Specify or our deared or language	
4.21	Novak, Berkowitz and Rosenberg	Last 4 digits of account number 7 6 0 1	\$94.76
	Nonpriority Creditor's Name 532 S. Aiken Ave, Suite 520	When was the debt incurred?	
	Number Street Pittsburgh PA 15232	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	■ Debtor 1 only □ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services	
	X No ☐ Yes	— Oulei, Opeoliy - 5-5-5-	

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Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

Peoples Natural Gas North Shore Drive Name 375 North Shore Drive Number Street Who incurred the debt? Check one. 20 Debtor 1 and Debtor 2 only Debtor 2 only At least one of the debtors and another Debtor 3 only Ves 4.23 See Attachment 2 Se	Afte	r listing any entries on this page, number them beginning with 4	9.5, followed by 4.6, and so forth.	Total claim
When was the debt incurred? Name PA 15212	4.22		Last 4 digits of account number	\$400.00
Pittsburgh		375 North Shore Drive	When was the debt incurred?	
City Sate ZiP Code Contingent City Code Contingent City Code Contingent City Code City			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Disputed	Peoples Name 375 North Shore Drive Number Street Pittsburgh PA 15212 City State ZIP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check of the debtors and another Check if this claim is for a community debt Pittsburgh PA 15230 City State ZIP Code Last 4 digits of account number Who incurred the debt? Check one. Debtor 2 only As of the date you file, the claim is: Check of NonPRIORITY unsecured claim Check if this claim is for a community debt See Attachment 2 Nonpriority Creditor's Name P.O. Box 640 Number Street Pittsburgh PA 15230 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Check if this claim is for a community debt Check if this claim is for a community debt Student loans Check if this claim is for a community debt Check if this claim is for			
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At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? August 1		Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt is the claim subject to offset? Ves				
Debts to pension or profit-sharing plans, and other similar debts		_		
A23 See Attachment 2 Last 4 digits of account number \$97.50		·	Debts to pension or profit-sharing plans, and other similar debts	
August Diagnostics Name P.O. Box 740717 Number Street Post Dost Office of Street Post Dost Office of Street Post Dost Diagnostics Post Dost Office of Street Post Dost Diagnostics Post Dost Diagnostics Post Dost Office of Street Post Dost Dost Dost Diagnostics Post Dost Office of Street Post Office of Str		XI No	Other, Specify during	
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Nonpriority Creditor's Name P.O. Box 640 Number Street Pittsburgh PA 15230 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 onfiscent Debtor 1 onfiscent Debtor 2 only Debtor 1 onfiscent Debtor 2 only Debtor 2 only Debtor 1 onfiscent Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only	4.23	See Attachment 2	Last 4 digits of account number	\$97.50
P.O. Box 640 Number Street Pittsburgh PA 15230 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Quest Diagnostics Nonpriority Creditor's Name PO Box 740717 Number Street Cincinnati OH 45274-0717 City State ZiP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only State ZiP Code Who incurred the debt? Check one. Debtor 1 only State ZiP Code Who incurred the debt? Check one. Debtor 1 only State ZiP Code Who incurred the debt? Check one. Debtor 1 only State ZiP Code Who incurred the debt? Check one. State ZiP Code Who incurred the debt? Check one. State ZiP Code Who incurred the debt? Check one. State ZiP Code Who incurred the debt? Check one. State ZiP Code Who incurred the debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only State ZiP Code State ZiP				
Pittsburgh			When was the debt incurred?	
Contingent			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Unliquidated Disputed			Contingent	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 3 community debt Siste claim is for a community debt Siste claim subject to offset? No Yes Quest Diagnostics Nonpriority Creditor's Name PO Box 740717 Number Street Ciniquati OH 45274-0717 City State ZiP Code Who incurred the debt? Check one. Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 pontic, Specify Parking Tickets Other. Specify Parking Tickets Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Debtor 1 only Debtor 2 only Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and othe				
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□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes 4.24 Quest Diagnostics Nonpriority Creditor's Name PO Box 740717 Number Street Cincinnati OH 45274-0717 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Student loans ○ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Parking Tickets □ Other. Specify Parking Tickets □ Other. Specify Parking Tickets □ When was the debt incurred? 8/30/2018 ■ As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Disputed □ Student loans				
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Cuest Diagnostics Nonpriority Creditor's Name PO Box 740717 Number Street Cincinnati OH 45274-0717 City State ZiP Code Who incurred the debt? Check one. Debts o pension or profit-sharing plans, and other similar debts Contingent Unliquidated Disputed Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Last 4 digits of account number 9 2 5 2 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans			Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt Is the claim subject to offset? I No Yes Cuest Diagnostics Nonpriority Creditor's Name PO Box 740717 Number Street Cincinnati OH 45274-0717 City State ZIP Code Who incurred the debt? Check one. Dobts to pension or profit-sharing plans, and other similar debts Contingent Who incurred the debt? Check one. Dobts to pension or profit-sharing plans, and other similar debts Cother. Specify Parking Tickets State 4 digits of account number 9 2 5 2 When was the debt incurred? 8/30/2018 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans				
Debts to pension or profit-sharing plans, and other similar debts Steel claim subject to offset? Cother. Specify Parking Tickets			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
X No		•	Debts to pension or profit-sharing plans, and other similar debts	
4.24 Quest Diagnostics Nonpriority Creditor's Name PO Box 740717 Number Street Cincinnati OH 45274-0717 City State ZIP Code Who incurred the debt? Check one. Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Student loans \$10.00 When was the debt incurred? ### As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Student loans			M Other. Specify Parking Lickets	
Quest Diagnostics Nonpriority Creditor's Name PO Box 740717 Number Street Cincinnati OH 45274-0717 City State ZIP Code Who incurred the debt? Check one. Monopriority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans				
Nonpriority Creditor's Name PO Box 740717 Number Street Cincinnati OH 45274-0717 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Nonpriority Creditor's Name When was the debt incurred? 8/30/2018 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	1.24		Look 4 digits of secount number 0 2 5 2	\$ <u>10.00</u>
When was the debt incurred? Number Street Street			Last 4 digits of account number	
Cincinnati OH 45274-0717 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans		PO Box 740717	When was the debt incurred? $8/30/2018$	
City State ZIP Code			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one. Unliquidated Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Student loans			Contingent	
Who incurred the debt? Check one. Disputed Disputed Disputed Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Student loans		, 5.0.0 211 0000		
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Student loans		Who incurred the debt? Check one.	•	
☐ Debtor 1 and Debtor 2 only			•	
2 Student loans			Type of NONPRIORITY unsecured claim:	
		•		
At least one of the debtors and another Obligations arising out of a separation agreement or divorce that				
☐ Check if this claim is for a community debt you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? Other. Specify Medical Services No		•	Other Specify Medical Services	
☑ No ☑ Yes				

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Part 2:

Your NONPRIORITY Unsecured Claims —Continuation Page

Afte	er listing any entries on this page, number them beginning with	a 4.5, followed by 4.6, and so forth.	Total claim
4.25	Quest Diagnostics	Last 4 digits of account number 2 5 9 6	\$ <u>10.00</u>
	Nonpriority Creditor's Name PO Box 740717	When was the debt incurred? 1/31/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Cincinnati OH 45274-0171 City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	★ Other. Specify Medical Services	
	No No Yes		
4.26		Last 4 digits of account number 5 8 7 5	_{\$} 10.00
	Quest Diagnostics Nonpriority Creditor's Name	_	<u> </u>
	PO Box 740717 Number Street	When was the debt incurred? 8/29/2018	
	Cincinnati OH 45274-0717	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. SpecifyMedical Services	
	X No □ Yes	— Guidi. Opeoliy	
4.27	Specialists in Cardiovascular Med., PC	Last 4 digits of account number 3 8 1 0	\$ <u>574.90</u>
	Nonpriority Creditor's Name 125 Daugherty Dr. Suite 301	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Monroeville PA 15146 City State ZIP Code	Contingent	
		☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	T. (NONEDIODITY	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	Other. Specify Medical Services	
	Yes		_

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Your NONPRIORITY Unsecured Claims —Continuation Page

Afte	er listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
4.28	Sprint Nonpriority Creditor's Name 6200 Sprint Parkway Number Street Overland Park KS 66251 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cellphone Service	\$Unknown
4.29	T-Mobile Nonpriority Creditor's Name 3747 William Penn Hwy Ste 1 Number Street Monroeville PA 15146 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 2 4 0 7 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Equipment	\$80.00
4.30	TWH of Pennsylvania LLC Nonpriority Creditor's Name 2425 River Road Suite 300 Number Street Ellwood City PA 16117 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number	\$ <u>3,035.80</u>

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Part 2: Your NONPRIORITY Unsecured Claims —Continuation Page

After list	ing any entries on this page, number them beginning with 4.5	5, followed by 4.6, and so forth.	Total claim
	MC Physician Services	Last 4 digits of account number 2 2 0	\$ <u>35.62</u>
See	e Attachment 4	When was the debt incurred? 7/17/2016	
Numb		As of the date you file, the claim is: Check all that apply.	
City	sburgh PA 15242 State ZIP Code	Contingent	
Who	o incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
_	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	ne claim subject to offset?	Other. Specify Medical Services	
\(\)			
.32		Last 4 digits of account number 4 9 0 7	\$601.14
UPI Nonp	MC Presby Shadyside (OP) viority Creditor's Name	4/04/0040	φ <u>σσ ι </u>
	e Attachment 5	When was the debt incurred? 1/31/2018	
Numb		As of the date you file, the claim is: Check all that apply.	
City	<u>Sburgh</u> <u>PA 15205</u> <u>State</u> ZIP Code	☐ Contingent	
14/1-	in a company that days to the	☐ Unliquidated	
	o incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
<u> </u>	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	ne claim subject to offset?	Other Specify Medical Services	
X N			
.33	D. Haironeite of Dittalermale Discrizione	Last 4 digits of account number 0 9 0 0	\$ <u>30.00</u>
	P - University of Pittsburgh Physicians viority Creditor's Name		
See	e Attachment 6	When was the debt incurred? 5/20/2016	
Peo		As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who	incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
_	Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	·	Debts to pension or profit-sharing plans, and other similar debts	
IS th		Other. Specify Medical Services	

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Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
4.34	Verizon	Last 4 digits of account number 1 _ 1 _ 5	\$863.00
	Nonpriority Creditor's Name PO Box 650584	When was the debt incurred? 2/6/2018	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Dallas TX 75265 City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed☐ Disputed☐ ☐ Disputed☐ ☐ Disputed☐ ☐ Disputed☐ ☐ DisputeDisp	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specifyphone bill	
	X No □ Yes		
4.35	Walgreens Specialty Pharmacy c/o Affiliated Group	Last 4 digits of account number 6 9 5 2	\$ <u>187.00</u>
	Nonpriority Creditor's Name	When was the debt incurred? June 2015	
	3055 41st Street NW Ste 100 Number Street	As of the date you file the claim in Check all that each	
	Rochester MN 55901	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	_ :	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify pharmacy bill	
	X No □ Yes		
4.36		Last 4 digits of account number 5 5 5 2 6	_{\$} 547.91
	Xfinity - Comcast Nonpriority Creditor's Name	-	
	676 Island Pond Road Number Street	When was the debt incurred? 10/10/2017	
	Manchester NH 03109-4840	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
	Debtor 1 only	— Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	lacksquare Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify General Services	
	Yes		

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First Name Middle Name Document Page 28 of 58

Part 3: List Others to Be Notified About a Debt That You Already Listed

Keri P. Ebeck, Bernstein - Burkley	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
707 Grant Street, Gulf Tower, Suite 2200 Number Street	■ Part 2: Creditors with Nonpriority Unsecured Claim
Pittsburgh, Pennsylvania 15219 City State ZIP Code	Last 4 digits of account number <u>0 0 0</u>
	Ou which control is Bout 4 on Bout 9 History Hat the control of the 20
Homevisions Name	On which entry in Part 1 or Part 2 did you list the original creditor?
1112 7th Avenue	Line <u>4.20</u> of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
Monroe, Wisconsin 53566 City State ZIP Code	Last 4 digits of account number 0 2 9 0
,	
S. James Wallace	On which entry in Part 1 or Part 2 did you list the original creditor?
845 N. Lincoln Avenue	Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
Pittsburgh, Pennsylvania 15233	Last 4 digits of account number
State ZIP Gode	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	On which entry in rare roll rare 2 did you list the original creditor:
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Claims
	- Cialins
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	_
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	-
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Oheathana) D Boot (O. 15) and D. 15
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Oli Oct	Part 2: Creditors with Nonpriority Unsecured Claims
	Lost 4 digits of account number
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total	claims
from	Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- Other. Add all other priority unsecured claims.
 Write that amount here.
- 6e. Total. Add lines 6a through 6d.
- Total claims from Part 2
- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total	clain	n

- 6a. ¢
- 6b. _{\$}
- 6c. _e
- 6d. + s
- 6e. \$_____

Total claim

- 6f. _{\$762.00}
- 6g. \$<u>0.00</u>
- 6h. \$0.00
- 6i. **+** \$41,301.12
- 6j. \$42,063.12

Attachment Debtor: JoAnn White Case No: 18-24394

Attachment 1

Judgements Related to Case Nos. MJ-05231-LT-0000702-2009 and MJ-05231-LT-0000965-2009

Attachment 2

Professional Account Management, LLC - Pittsburgh Parking Court

Attachment 3

Judgement related to Case No. MJ-05206-LT-0000286-2016

Attachment 4

c/o CMC Credit Management Company 2121 Noblestown Road

Attachment 5

c/o CMC Credit Management Company 2121 Noblestown Road

Attachment 6

c/o Convergent Healthcare Recoveries, Inc. 121 NE Jefferson Street, Suite 100

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Fill in this in	nformation to ide	entify your case:	
Debtor	JoAnn White First Name	Middle Name	Last Name
Debtor 2 (Spouse If filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court fo	or the: Western District of	f Pennsylvania
Case number (If known)	18-24394		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - Mo. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with who	om you l	nave the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	•
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	•
2.3	Name				
	Number	Street			
0.4	City		State	ZIP Code	
2.4	Name				
	Number	Street			
		Sireet			
2.5	City		State	ZIP Code	
2.0	Name				
	Number	Street			
	City		State	ZIP Code	
	City		Jiaie	ZII COUR	

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	itify your case:	
JoAnn White First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
	the:Western District o	f Pennsylvania
	me. Trootom Biotriot o	. i cimoyivama
18-24394		
J	First Name	First Name Middle Name First Name Middle Name Sankruptcy Court for the: Western District o

Official Form 106H

Schedule H: Your Codebtors

12/15

☐ Check if this is an amended filing

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

case	number (ii	known). Answer	every question.					
	Do you hav ☑ No	e any codebtors?	(If you are filing a joint case, do n	ot list either spouse as a	a codebtor.)			
	Yes							
		ithin the last 8 years, have you lived in a community property state or territory? (Community property states and territories include izona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)						
	No. Go		ner spouse, or legal equivalent live	with you at the time?				
	□ No	a your spouse, rom	ioi spouse, oi logai equivalent live	with you at the time:				
		In which commun	ity state or territory did you live?	_	Fill in the name and current address of that person.			
	u res	. III WIIICH COMMUNI	ity state of territory did you live?		iii iii the name and current address of that person.			
	Nam	ne of your spouse, former	spouse, or legal equivalent					
	Num	ber Street						
	City		State	ZIP Code				
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.					Make sure you have listed the creditor on			
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt			
					Check all schedules that apply:			
3.1					□ Schedule D, line			
	Name				Schedule E/F, line			
	Number	Street			Schedule G, line			
	City		State	ZIP Code	_			
3.2								
	Name				Schedule D, line			
					Schedule E/F, line			
	Number	Street			☐ Schedule G, line			
	City		State	ZIP Code				
3.3					Cahadula D. lina			
	Name				Schedule D, line			
	Number	Street			Schedule E/F, line			
	INUITIDEL	Street			☐ Schedule G, line			
	City		State	ZIP Code	_			

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chedule I: Your Income 12/1 Is a complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for plying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse is needed, attach a arate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fill in your employment Debtor 1 Debtor 2 or non-filling spouse		our case:		
totor 2 toos, if filing) Fort Nerve				
ted States Bankruptcy Court for the:		Middle Name	Last Name	
Check if this is: An amended filing A supplement showing post-petition chapter 13 income as of the following date A supplement showing post-petition chapter 13 income as of the following date	Duse, if filing) First Name			
An amended filing		Western District of	Pennsylvania	
A supplement showing post-petition chapter 13 income as of the following date MM / DD / YYYY			<u> </u>	
chapter 13 income as of the following date include is include it. Your Income s complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for young properly of the formation. If you have more than one job, attact 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filis spouse have more than one employer, combine the information for fall employers for that person on the lines				3
s complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for oblying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a rate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Employment			_	chapter 13 income as of the following date:
s complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for plying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a variet sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. The special page is needed, attach a variet sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. The special page is needed, attach a variet sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. The special page is needed, attach a variet sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. The special page is needed, attach a variet sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. The special page is needed, attach a variet sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. The special page is needed, attach a variet sheet to this form. If you have nothing to report for any line, write \$0 in the space. Include your name and case number (if known). Answer every question. The special page is needed, attach a variet sheet to this form. If you have nothing to report for any line, write \$0 in the space. Include your name and case number (if known). Answer every question. The special page is needed, attach a variet sheet to this form. If you have nothing to report for any line, write \$0 in the space. Include your name and case number (if known). Answer every question. The special page is needed, attach a variety sheet and case number (if known). Answer every question. The special page is needed, attach a variety sheet a	icial Form 106I			MM / DD / YYYY
Solving correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse is not filling with you, include information about your spouse. If more space is needed, attach a strate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Poscribe Employment	chedule I: You	r Income		12/15
If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may Include student or homemaker, if it applies. Employer's name Employer's address Number Street Number Street Number Street Tity State ZIP Code Tity St			Debtor 1	Debtor 2 or non-filing spouse
Include part-time, seasonal, or self-employed work. Occupation may Include student or homemaker, if it applies. Employer's name Employer's address Number Street Street Number Street	information. If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed	☐ Employed
Occupation may Include student or homemaker, if it applies. Employer's name Employer's address Number Street City State ZIP Code City State ZIP Code How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-fil spouse unless you are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines	Include part-time, seasonal, or			
Employer's address Number Street Number Street	Occupation may Include student	Occupation		
Number Street Number Street Number Street	or nomemaker, it it applies.	Employer's name		
Number Street Number Street Number Street				
How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-fil spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines	••	Employer's address		
How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-fil spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines		Employer's address	Number Street	Number Street
How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-fil spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines		Employer's address	Number Street	Number Street
Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-file spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines		Employer's address		
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-fil spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines			City State ZIP Code	
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-fil spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines			City State ZIP Code	
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines		How long employed the	City State ZIP Code	
	art 2: Give Details About	How long employed the	City State ZIP Code	e City State ZIP Code
	art 2: Give Details About Estimate monthly income as of spouse unless you are separated	How long employed the Monthly Income the date you file this for	City State ZIP Codere? m. If you have nothing to report for a	City State ZIP Code ny line, write \$0 in the space. Include your non-filing

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

non-filing spouse

\$0.00

+ \$0.00

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Debtor 1

JoAnn White First Name Mic

Middle Name

Last Name

Case number (if known) 18-24394

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$ <u>0.00</u>	\$ <u>0.00</u>	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$	\$0.00	
5b. Mandatory contributions for retirement plans	5b.	\$		
5c. Voluntary contributions for retirement plans	5c.	\$		
5d. Required repayments of retirement fund loans	5d.	\$		
5e. Insurance	5e.	\$		
5f. Domestic support obligations	5f.	\$		
5g. Union dues	5g.	\$		
5h. Other deductions. Specify:	_	+\$		
			_	
6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	h. 6.	\$ <u>0.00</u>	<u>\$0.00</u>	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>0.00</u>	\$ <u>0.00</u>	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <u>N/A</u>	<u>\$0.00</u>	
8b. Interest and dividends	8b.	\$ <u>0.00</u>	<u>\$</u> 0.00	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	dent			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ <u>0.00</u>	\$ <mark>0.00</mark>	
8d. Unemployment compensation	8d.	\$ <u>0.00</u>	\$ 0.00	
8e. Social Security	8e.	\$ <u>1,242.00</u>	\$ <u>0.00</u>	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: SNAP		\$ <u>12.00</u>	<u>\$0.00</u>	
	_ 0~	\$38.21	\$0.00	
8g. Pension or retirement income	8g.	•		
8h. Other monthly income. Specify:	_ 8h.	+\$0.00	+ \$0.00	
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ <u>1,292.21</u>	<u>\$0.00</u>	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ <u>1,292.21</u>	+ \$0.00	\$ <u>1,292.21</u>
11. State all other regular contributions to the expenses that you list in Sch Include contributions from an unmarried partner, members of your household friends or relatives.			commates, and other	
Do not include any amounts already included in lines 2-10 or amounts that ar		ailable to pay exp	enses listed in Schedule J.	
Specify:			11. +	. \$ <u>0.00</u>
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain			•	<u>\$1,292.21</u>
				Combined monthly income
13. Do you expect an increase or decrease within the year after you file this No.	s form?			onany moonie
☐ Yes. Explain:				

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Fill in this information to identify your case:			
Debtor 1 JOAnn White First Name Middle Name Last Name	Check if this is:		
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	An amende	-	
United States Bankruptcy Court for the: Western District of Pennsylv		nt showing post-p s of the following o	
Case number 18-24394	MM / DD / YY		auto.
(If known)	IVIIVI / DD / T I	11	
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are fili information. If more space is needed, attach another sheet to this form (if known). Answer every question.			_
Part 1: Describe Your Household			
1. Is this a joint case?			
No. Go to line 2. Yes. Does Debtor 2 live in a separate household?			
□ No□ Yes. Debtor 2 must file Official Forms 106J-2, Expenses for	Separate Household of Debtor 2.		
2. Do you have dependents?			
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'			□ No
names.			Yes
			No Yes Yes No No
			□ No
			☐ Yes
			☐ No
			Yes
			□ No □ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you expenses as of a date after the bankruptcy is filed. If this is a supplemapplicable date.			
Include expenses paid for with non-cash government assistance if yo		Your exper	1606
such assistance and have included it on Schedule I: Your Income (Off	,	Tour exper	1363
 The rental or home ownership expenses for your residence. Includ any rent for the ground or lot. 	0017	4. \$ <u>500.00</u>	
If not included in line 4:		-0.00	
4a. Real estate taxes		4a. \$0.00	
4b. Property, homeowner's, or renter's insurance		4b. \$0.00	
4c. Home maintenance, repair, and upkeep expenses		4c. \$0.00	
4d. Homeowner's association or condominium dues		_{4d.} \$ 0.00	

4d.

4d. Homeowner's association or condominium dues

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Debtor 1

JoAnn White
First Name Middle Name

Last Name

Case number (if known) 18-24394

			Your expenses
5. Ad	ditional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Ut i			
6a.		6a.	\$389.00
6b.	Water, sewer, garbage collection	6b.	\$135.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$239.00
6d.		6d.	\$0.00
7. Fo	od and housekeeping supplies	7.	\$ <u>156.00</u>
8. C h	ildcare and children's education costs	8.	\$0.00
9. Cl	othing, laundry, and dry cleaning	9.	\$60.00
	rsonal care products and services	10.	\$30.00
	dical and dental expenses	11.	\$115.00
	Insportation. Include gas, maintenance, bus or train fare.		
	not include car payments.	12.	\$ <u>45.00</u>
13. E n	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ <u>0.00</u>
4. C	aritable contributions and religious donations	14.	\$ <u>0.00</u>
	surance. not include insurance deducted from your pay or included in lines 4 or 20.		
15	a. Life insurance	15a.	\$0.00
151	o. Health insurance	15b.	\$ <u>0.00</u>
150	. Vehicle insurance	15c.	\$89.00
150	Other insurance. Specify:	15d.	\$ <u>0.00</u>
	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16.	\$0.00
7. Ins	stallment or lease payments:		
17:	a. Car payments for Vehicle 1	17a.	\$ <u>0.00</u>
171	c. Car payments for Vehicle 2	17b.	\$ <u>0.00</u>
	c. Other. Specify:	17c.	\$
	d. Other. Specify:	17d.	\$
	ur payments of alimony, maintenance, and support that you did not report as deducted from ur pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	<u>\$0.00</u>
19. Ot	ner payments you make to support others who do not live with you.		
Sp	ecify:	19.	\$ <u>0.00</u>
20. Ot	ner real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incon	ie.	
20	a. Mortgages on other property	20a.	\$ <u>0.00</u>
201	o. Real estate taxes	20b.	\$ <u>0.00</u>
200	. Property, homeowner's, or renter's insurance	20c.	\$ <u>0.00</u>
200	a. Maintenance, repair, and upkeep expenses	20d.	\$ <u>0.00</u>
200	e. Homeowner's association or condominium dues	20e.	\$ <u>0.00</u>

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	JoAnn White First Name Middle Name Last Name	Case number (if known) 18-24	394
21. Other . S	pecify: Banking Fees	21.	+\$50.00
22a. Add 22b. Cop	e your monthly expenses. lines 4 through 21. y line 22 (monthly expenses for Debtor 2), if any, from Official Foline 22a and 22b. The result is your monthly expenses.	orm 106J-2 22.	\$ <u>1,808.00</u> \$ \$ <u>1,808.00</u>
23. Calculate	your monthly net income.		
23а. Сор	by line 12 (your combined monthly income) from Schedule I.	23a.	\$ <u>1,292.21</u>
23b. Cop	y your monthly expenses from line 22 above.	23b.	- \$ <u>1,808.00</u>
	tract your monthly expenses from your monthly income. result is your <i>monthly net income</i> .	23c.	\$ <u>-515.79</u>
For examp	expect an increase or decrease in your expenses within the yole, do you expect to finish paying for your car loan within the ye payment to increase or decrease because of a modification to the	ar or do you expect your	
Yes.	Explain here:		

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Fill in this in	formation to identify	your case:	
Debtor 1	JoAnn		White
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Western District of Per	nnsylvania
Case number	18-24394		
2	(If known)		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ 0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 3,441.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 2,862.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$60,113.12
Your total liabilities	\$ 60,113.12
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>1,292.21</u>
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$ <u>1,808.00</u>

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Debtor 1

JoAnn
First Name Middle Name

White

Case number (if known) 18-24394

Ŀŧ	art 4: Answer These Questions for Administrative and Statistical Records	5
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	☐ No. You have nothing to report on this part of the form. Check this box and submit this f ☑ Yes	form to the court with your other schedules.
7.	What kind of debt do you have?	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by ar family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purpose.	
	Your debts are not primarily consumer debts. You have nothing to report on this parthis form to the court with your other schedules.	rt of the form. Check this box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	s 38.21
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
		Total claim
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	§ <u>0.00</u>
	9d. Student loans. (Copy line 6f.)	_{\$} 762.00
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
	9g. Total. Add lines 9a through 9f.	§762.00

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Fill in this inf	formation to identify	your case:	
Debtor 1	JoAnn White First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Western District	of Pennsylvania
Case number (If known)	18-24394		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
	ave read the summary and schedules filed with this declaration and
	ave read the summary and schedules filed with this declaration and
der penalty of perjury, I declare that I h t they are true and correct.	ave read the summary and schedules filed with this declaration and
	ave read the summary and schedules filed with this declaration and

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Fill in this in	formation to identify	your case:	
Debtor 1	JoAnn First Name	Middle Name	White Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court for the:	Western District of Penr	nsylvania
Case number (If known)	18-24394		

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

□м	is your current marit larried ot married	al status?				
X N	o es. List all of the place	ve you lived anywhere on some some some some some some some some	ears. Do not include	where you live now.		
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
	Number Street		From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
	City	State ZIP Code		City	State ZIP Code	
	Number Street		From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
3. Withi	City n the last 8 years, die	State ZIP Code	oouse or legal equiv	City alent in a community property Mexico, Puerto Rico, Texas, W	State ZIP Code state or territory? (Co	ommunity property states sin.)

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Debtor 1 JoAnn White
First Name Middle Name Last Name

Case number (if known) 18-24394

Fill in the total amount of income you received in the total amount of income you received if you are filing a joint case and you have inco		nesses, including part-tir	me activities.	dar years?
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tipsOperating a business	\$0.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For last calendar year:	Wages, commissions, bonuses, tips	<u>\$15,111.00</u>	Wages, commissions, bonuses, tips	\$
(January 1 to December 31, 2017	Operating a business		Operating a business	
For the calendar year before that: (January 1 to December 31, 2016	Wages, commissions, bonuses, tips Operating a business	\$ <u>12,675.00</u>	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
nclude income regardless of whether that inc and other public benefit payments; pensions; vinnings. If you are filing a joint case and you	come is taxable. Examples rental income; interest; div have income that you received.	of other income are alimidends; money collected eived together, list it only	d from lawsuits; royalties; an once under Debtor 1.	
nclude income regardless of whether that income of the public benefit payments; pensions; vinnings. If you are filing a joint case and you list each source and the gross income from a No	come is taxable. Examples rental income; interest; div have income that you received.	of other income are alimidends; money collected eived together, list it only	d from lawsuits; royalties; an once under Debtor 1.	
nclude income regardless of whether that income of the public benefit payments; pensions; vinnings. If you are filing a joint case and you list each source and the gross income from a No	come is taxable. Examples rental income; interest; div have income that you received.	of other income are alimidends; money collected eived together, list it only	d from lawsuits; royalties; an once under Debtor 1.	
nclude income regardless of whether that income of the public benefit payments; pensions; vinnings. If you are filing a joint case and you list each source and the gross income from a No	come is taxable. Examples rental income; interest; div have income that you receatch source separately. Do	of other income are alimidends; money collected eived together, list it only	d from lawsuits; royalties; and once under Debtor 1. It you listed in line 4.	Gross income from each source
nclude income regardless of whether that income of the public benefit payments; pensions; rinnings. If you are filing a joint case and you list each source and the gross income from a No Yes. Fill in the details.	come is taxable. Examples rental income; interest; div have income that you rece each source separately. Do Debtor 1 Sources of income	of other income are alimited as a single of other income are alimited as a single of other include income that one include income that one of other include income that other include income that other include income that other include income that other includes income from each source (before deductions and exclusions)	d from lawsuits; royalties; and once under Debtor 1. t you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and exclusions)
nclude income regardless of whether that income of the public benefit payments; pensions; vinnings. If you are filing a joint case and you list each source and the gross income from a No	come is taxable. Examples rental income; interest; div have income that you received have source separately. Do Debtor 1 Sources of income Describe below.	of other income are alimited are sidents; money collected eived together, list it only a not include income that the control of the control o	d from lawsuits; royalties; and once under Debtor 1. It you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
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reclude income regardless of whether that income of the public benefit payments; pensions; vinnings. If you are filing a joint case and you ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year:	come is taxable. Examples rental income; interest; div I have income that you receive ach source separately. Do Debtor 1 Sources of income Describe below. Social Security	of other income are alimited of other income are alimited on the income that it only on the income that on the income inc	d from lawsuits; royalties; and once under Debtor 1. It you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)	come is taxable. Examples rental income; interest; div I have income that you receive ach source separately. Do Debtor 1 Sources of income Describe below. Social Security	of other income are alimited of other income are alimited on the indentity of the income that it only to not include income that on the income	d from lawsuits; royalties; and once under Debtor 1. It you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$

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Debtor 1 JoAnn White Case number (if known) 18-24394

First Name Middle Name Last Name

	LIST	Certain Paym	ents You I	Made Befor	e You Filed	for Bankruptcy		
Are e	either D	ebtor 1's or Debt	tor 2's debt	s primarily co	onsumer debt	s?		
							e defined in 11 U.S.C. § 101(8) ac
_ '\						ousehold purpose."	s defined in 11 0.5.c. g 101(o) as
	Dur	ing the 90 days be	efore you file	ed for bankrup	tcy, did you pa	ay any creditor a total of	\$6,425* or more?	
		No. Go to line 7.						
		total amount child suppor	t you paid that t and alimon	at creditor. Do y. Also, do no	not include paym	ayments for domestic su nents to an attorney for the	• •	
	* Sı	ubject to adjustme	nt on 4/01/1	9 and every 3	years after the	at for cases filed on or at	ter the date of adjustment.	
X Y	es. De k	otor 1 or Debtor 2	2 or both ha	ve primarily	consumer del	bts.		
	Dur	ing the 90 days be	efore you file	ed for bankrup	tcy, did you pa	ay any creditor a total of	\$600 or more?	
	X	No. Go to line 7.						
		creditor. Do	not include p	payments for o	domestic supp	\$600 or more and the to ort obligations, such as o by for this bankruptcy cas	child support and	
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
						\$	_ \$	☐ Mortgage
		Creditor's Name						☐ Car
		Number Street						☐ Credit card
		Number Street						Loan repayment
								☐ Suppliers or vendor
		City.	Ctata	ZIP Code				Other
		City	State	ZIP Code				
						\$	\$	
						Φ	_ Ψ	■ Mortgage
		Creditor's Name						
		Creditor's Name						☐ Car
		Number Street						☐ Car☐ Credit card
								☐ Car☐ Credit card☐ Loan repayment
								☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors
			State	ZIP Code				☐ Car ☐ Credit card ☐ Loan repayment
		Number Street City	State	ZIP Code		\$	_ \$	☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors
		Number Street	State	ZIP Code		\$	_ \$	☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other
		Number Street City	State	ZIP Code		\$	_ \$	Car Credit card Loan repayment Suppliers or vendor Other Mortgage
		Number Street City Creditor's Name	State	ZIP Code		\$	_ \$	Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car
		Number Street City Creditor's Name	State	ZIP Code		\$	_ \$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card

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Case number (if known) 18-24394

Within 1 year before you filed for Insiders include your relatives; an corporations of which you are an agent, including one for a busines such as child support and alimon	ny general partners; re officer, director, perse ss you operate as a s	elatives of any on in control, or	general partners; partners; partners	artnerships of which nore of their voting	n you are a general partner; securities; and any managing
⋈ No					
Yes. List all payments to an ir	nsider.				
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name			\$	\$	
Number Street					
City	State ZIP Code				
			\$	\$	
Insider's Name					
Number Street					
City	State ZIP Code				
		ou make any pa	ayments or transf	er any property on	account of a debt that benefited
Within 1 year before you filed fo an insider? nclude payments on debts guara No	or bankruptcy, did yo	an insider.			
Within 1 year before you filed fo an insider? nclude payments on debts guara No	or bankruptcy, did yo		Total amount	er any property on Amount you still owe	Reason for this payment
Vithin 1 year before you filed for in insider? Include payments on debts guara	or bankruptcy, did yo	an insider.	Total amount paid	Amount you still owe	
Vithin 1 year before you filed fo an insider? nclude payments on debts guara	or bankruptcy, did yo	an insider.	Total amount	Amount you still	Reason for this payment
Within 1 year before you filed for an insider? Include payments on debts guara No Yes. List all payments that be	or bankruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for an insider? Include payments on debts guara No Yes. List all payments that be	or bankruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for an insider? Include payments on debts guara No Yes. List all payments that be	or bankruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for an insider? Include payments on debts guara No Yes. List all payments that be	or bankruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for an insider? nclude payments on debts guara No Yes. List all payments that be Insider's Name	or bankruptcy, did yo	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for an insider? Include payments on debts guara No Yes. List all payments that be Insider's Name Number Street	or bankruptcy, did younteed or cosigned by inefited an insider.	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for an insider? nclude payments on debts guara No Yes. List all payments that be Insider's Name	or bankruptcy, did younteed or cosigned by inefited an insider.	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for an insider? nclude payments on debts guara No Yes. List all payments that be Insider's Name Number Street City	or bankruptcy, did younteed or cosigned by inefited an insider.	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed form insider? Include payments on debts guara No Yes. List all payments that be Insider's Name Number Street City	or bankruptcy, did younteed or cosigned by inefited an insider.	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for insider? Include payments on debts guara No Yes. List all payments that be Insider's Name Number Street City Insider's Name	or bankruptcy, did younteed or cosigned by inefited an insider.	an insider.	Total amount paid	Amount you still owe	Reason for this payment
Within 1 year before you filed for insider? Include payments on debts guara No Yes. List all payments that be Insider's Name Number Street City Insider's Name	or bankruptcy, did younteed or cosigned by inefited an insider.	an insider.	Total amount paid	Amount you still owe	Reason for this payment

JoAnn White

Middle Name

Last Name

Debtor 1

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Debtor 1 JoAnn White
First Name Middle Name Last Name

Case number (if known) 18-24394

hin 1 year before you filed fo all such matters, including per contract disputes.			awsuit, court action, or divorces, collection suits,			
No						
Yes. Fill in the details.						
	Natur	re of the case	Court or agency	у		Status of the case
Case title			Court Name			— Pending
						On appeal
			Number Street			Concluded
Case number						
			City	State ZIP	Code	
						П- "
Case title			Court Name			— Pending
- 						On appeal
			Number Street			Concluded
Case number						
			City	State ZIP	Code	
No. Go to line 11. Yes. Fill in the information belo	ow.					
	ow.	Describe the prope	erty	D	ate	Value of the property
	ow.	Describe the prope	erty	D -	ate	Value of the property \$
Yes. Fill in the information belonger of the second of the	ow.	_		D -	ate	Value of the property
Yes. Fill in the information belonger	ow.	Explain what happ	ened	D -	ate	
Yes. Fill in the information belonger of the second of the	ow.	Explain what happ Property was	ened s repossessed.	D -	ate	
Yes. Fill in the information belonger of the second of the	ow.	Explain what happ Property was Property was	ened s repossessed. s foreclosed.	D	ate	
Yes. Fill in the information belonger of the second of the	OW. State ZIP Code	Explain what happ Property was Property was Property was	ened s repossessed. s foreclosed.	_	ate	
Yes. Fill in the information belonger Creditor's Name Number Street		Explain what happ Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or lev	ried.	ate	\$
Yes. Fill in the information belonger Creditor's Name Number Street		Explain what happ Property was Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or lev	ried.		\$
Yes. Fill in the information belonger Creditor's Name Number Street		Explain what happ Property was Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or lev	ried.		
Yes. Fill in the information belonger Creditor's Name Number Street		Explain what happ Property was Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or lev	ried.		\$
Yes. Fill in the information belonger Creditor's Name Number Street		Explain what happ Property was Property was Property was Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or leverty	ried.		\$
Creditor's Name Number Street City Creditor's Name		Explain what happ Property was Property was Property was Property was Property was Describe the property	ened s repossessed. s foreclosed. s garnished. s attached, seized, or leverty	ried.		\$
Creditor's Name Number Street City Creditor's Name		Explain what happ Property was Property was Property was Property was Describe the property Explain what happ Property was	ened s repossessed. s foreclosed. s garnished. s attached, seized, or leverty ened s repossessed.	ried.		\$
Creditor's Name Number Street City Creditor's Name		Explain what happ Property was Property was Property was Property was Property was Describe the property	ened s repossessed. s foreclosed. s garnished. s attached, seized, or leverty ened s repossessed. s foreclosed.	ried.		\$

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	JoAnn White				_	Case number (if kr	nown) IO Z-TOO-T		
	First Name Midd	dle Name	Last Na	ame					
				cy, did any creditor, luse you owed a deb		or financial inst	itution, set off any	amounts from ye	our
No				, ,					
Yes	s. Fill in the details.								
				Describe the action to	he creditor took		Date action	Amount	
Crec	ditor's Name						was taken		
0.00	and o name								
Num	mber Street							\$	
City	1	State Z	ZIP Code	Last 4 digits of acco	ount number: XXXX	<			
				y, was any of your pi todian, or another of		session of an as	ssignee for the ben	efit of	
No			, a oaoi	iodian, or unotilor of					
Yes									
F									
Ħ	List Certain Gi	itts and C	Contributi	ions					
		u filed for	bankrupto	cy, did you give any	gifts with a total v	alue of more tha	ın \$600 per person	?	
No)			cy, did you give any (gifts with a total v	alue of more tha	nn \$600 per person	?	
No				cy, did you give any e	gifts with a total v	alue of more tha	ın \$600 per person	?	
No Yes	s. Fill in the details	for each gi	jift.	cy, did you give any go	gifts with a total v	alue of more tha	Dates you ga		
No Yes	s. Fill in the details	for each gi	jift.		gifts with a total v	alue of more tha			
No Yes	s. Fill in the details	for each gi	jift.		gifts with a total v	alue of more tha	Dates you ga	ive Value	
No Yes Gi pe	s. Fill in the details	for each gi	jift.		gifts with a total v	alue of more tha	Dates you ga		
No Yes Gi pe	s. Fill in the details sifts with a total value er person	for each gi	jift.		gifts with a total v	alue of more tha	Dates you ga	ive Value	
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Pers City	s. Fill in the details iifts with a total value er person son to Whom You Gave to	for each gi	ziP Code	Describe the gifts	gifts with a total v	alue of more tha	Dates you gathe gifts	\$\$	
Pers City Pers	s. Fill in the details if the swith a total value er person	for each gi	ziP Code		gifts with a total v	alue of more tha	Dates you ga	\$\$	
Pers City Pers	s. Fill in the details s. Fill in the details sifts with a total value er person son to Whom You Gave to rson's relationship to y	for each gi	ziP Code	Describe the gifts	gifts with a total v	alue of more tha	Dates you gathe gifts Dates you gathe	\$\$	
No Yes Gift Pers	s. Fill in the details is sifts with a total value of person.	for each gi	ziP Code	Describe the gifts	gifts with a total v	alue of more tha	Dates you gathe gifts Dates you gathe	\$\$	
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Pers City Pers Gift per	s. Fill in the details is sifts with a total value of person.	for each gi	ziP Code	Describe the gifts	gifts with a total v	alue of more tha	Dates you gathe gifts Dates you gathe	\$\$	
Pers City Pers Gift per	s. Fill in the details is sifts with a total value of person.	for each gi	ziP Code	Describe the gifts	gifts with a total v	alue of more tha	Dates you gathe gifts Dates you gathe	\$\$	
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Pers City Pers	s. Fill in the details sifts with a total value er person son to Whom You Gave to r son's relationship to y tts with a total value or r person son to Whom You Gave to	for each gi	ziP Code	Describe the gifts	gifts with a total v	alue of more tha	Dates you gathe gifts Dates you gathe	\$\$	

Debtor 1

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JoAnn White	Case number (if known)	8-24394	
First Name Middle Name	Last Name		
thin 2 years before you filed for ban	kruptcy, did you give any gifts or contributions with a total value	e of more than \$600	to any charity?
No	,,	, , , , , , , , , , , , , , , , , , ,	,,
No Yes. Fill in the details for each gift or	contribution		
res. I ill ill the details for each girt of	Contribution.		
Gifts or contributions to charities	Describe what you contributed	Date you	Value
that total more than \$600		contributed	
			\$
Charity's Name			
			\$
City State ZIP Code			
6: List Certain Losses			
gambling? No Yes. Fill in the details.	ruptcy or since you filed for bankruptcy, did you lose anything b		
No	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of property lost
No Yes. Fill in the details. Describe the property you lost and ho	ow Describe any insurance coverage for the loss	Date of your loss	
No Yes. Fill in the details. Describe the property you lost and ho	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	
No Yes. Fill in the details. Describe the property you lost and ho	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	lost
No Yes. Fill in the details. Describe the property you lost and ho	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	lost
No Yes. Fill in the details. Describe the property you lost and ho the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	lost
No Yes. Fill in the details. Describe the property you lost and ho the loss occurred 7: List Certain Payments or 1	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		\$
No Yes. Fill in the details. Describe the property you lost and he the loss occurred 7: List Certain Payments or Tithin 1 year before you filed for bank	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Fransfers cruptcy, did you or anyone else acting on your behalf pay or trans		\$
No Yes. Fill in the details. Describe the property you lost and ho the loss occurred 7: List Certain Payments or 1 thin 1 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year before you filed for bank-insulted about seeking bankruptcy or 1 thin 2 year bankruptcy or 1 year bankruptcy or 1 year bankruptcy or 1 year bankruptcy or 1 year bankru	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	sfer any property to	\$
No Yes. Fill in the details. Describe the property you lost and he the loss occurred 7: List Certain Payments or 1 within 1 year before you filed for bank onsulted about seeking bankruptcy oclude any attorneys, bankruptcy petition.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Fransfers Kruptcy, did you or anyone else acting on your behalf pay or transor preparing a bankruptcy petition?	sfer any property to	\$
No Yes. Fill in the details. Describe the property you lost and he the loss occurred 7: List Certain Payments or 1 thin 1 year before you filed for bank nsulted about seeking bankruptcy oclude any attorneys, bankruptcy petition.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Fransfers Kruptcy, did you or anyone else acting on your behalf pay or transor preparing a bankruptcy petition?	sfer any property to	\$
No Yes. Fill in the details. Describe the property you lost and he the loss occurred 7: List Certain Payments or 1 thin 1 year before you filed for bank ensulted about seeking bankruptcy oclude any attorneys, bankruptcy petition.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Fransfers Cruptcy, did you or anyone else acting on your behalf pay or transfor preparing a bankruptcy petition? In preparers, or credit counseling agencies for services required in your preparers.	sfer any property to	\$anyone you
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JoAnn White Case number (if known) 18-24394 Debtor 1 First Name Middle Name Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street City ZIP Code State Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. X No ☐ Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Street Number ZIP Code State 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. X No ☐ Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street City ZIP Code State Person's relationship to you Person Who Received Transfer

Number

City

Street

Person's relationship to you _

ZIP Code

State

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otor 1	JoAnn White First Name Middle Name La	ast Name	Cas	e number (if know	_{n)} 18-24394	
18000						
are a			y to a self-	settled trust o	or similar device of wh	iich you
– 1	es. Fill in the details.					
		Description and value of the prope	rty transferr	ed		Date transfer was made
Ν	lame of trust	_				
_		_				
t 8:	List Certain Financial Accoun	ts, Instruments, Safe Deposit E	Boxes, an	d Storage U	Inits	
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」)	es. Fill in the details.					
		Last 4 digits of account number	Type of a instrume		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial Institution		Check	-		\$
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	City State ZIP Code	_	Other			
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secu	ou now have, or did you have within urities, cash, or other valuables?	1 year before you filed for bankrup	tcy, any sa	fe deposit bo	x or other depository	for
N 🔯	vo /es. Fill in the details.					
		Who else had access to it?		Describe the	contents	Do you still have it?
						⊠ No
	Name of Financial Institution	Name				☐ Yes
	Number Street	Number Street				
		City State ZIP Code				
	City State ZIP Code	- State ZIF CODE				

Debtor 1

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or 1	JoAnn White		Case number (if known) 18-24394	
	First Name Middle Name Las	st Name	,	
		or place other than your home within 1	1 year before you filed for bankruptcy?	
X No	•			
Ye	es. Fill in the details.			
		Who else has or had access to it?	Describe the contents	Do you stil
				have it?
				□ No
	Name of Storage Facility	Name		☐ Yes
	Number Street	Number Street		
		CityState ZIP Code		
	City State ZIP Code			
rt 9:	Identify Property You Hold	or Control for Someone Else		
Do w	ou hold or control any property that s	compone also owns? Include any prope	arty you barrowed from are storing for	
-	ou hold or control any property that s old in trust for someone.	someone eise owns? include any propi	erty you borrowed from, are storing for	,
M N				
u Y	es. Fill in the details.			
		Where is the property?	Describe the property	Value
	Owner's Name			\$
				Ψ
	Number Street	Number Street		
	Number Street	Number Street		
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		Number Street City State ZIP Co	de	
	Number Street City State ZIP Code		de	
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Debtor 1 JoAnn White
First Name Middle Name Last Name

Case number (if known) 18-24394

No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street	_	
	City State ZIP Code	_	
City State ZIP C	Code		
vo vou boon a narty in any judicial	or administrative proceeding under a	ny anvironmental law? Include cattlements	and orders
No	or administrative proceeding under a	ny environmental law? Include settlements	s and orders.
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the case
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	Court Name		Pending
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Give Details About You thin 4 years before you filed for bath A sole proprietor or self-emplor A member of a limited liability A partner in a partnership An officer, director, or managon An owner of at least 5% of the No. None of the above applies. Generally above a self-employed an owner of the above applies. Generally above and the self-employed an	City State ZIP or Business or Connections to Any ankruptcy, did you own a business or loyed in a trade, profession, or other any company (LLC) or limited liability paraging executive of a corporation evoting or equity securities of a corporation to Part 12.	y Business have any of the following connections to a activity, either full-time or part-time etnership (LLP) pration siness. Employer Identification	ny business? n number Security number or ITIN.
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Case number (if known) 18-24394

-			
		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	Business Name		EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
			From To
	City State ZIP Code		
insti	itutions, creditors, or other parties.	cy, did you give a financial statement to anyone	e about your business? Include all financial
U 1	Yes. Fill in the details below.	Date issued	
	Name	MM / DD / YYYY	
	Number Street		
	City State ZIP Code		
art 12	2: Sign Below		
l ha ans in c	ave read the answers on this <i>Statement</i> swers are true and correct. I understand	of Financial Affairs and any attachments, and that making a false statement, concealing proresult in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud
I ha ans in o 18	ave read the answers on this Statement swers are true and correct. I understand connection with a bankruptcy case can	d that making a false statement, concealing pro	perty, or obtaining money or property by fraud
I ha ans in o 18	ave read the answers on this <i>Statement</i> swers are true and correct. I understand connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 3571.	d that making a false statement, concealing pro result in fines up to \$250,000, or imprisonment	perty, or obtaining money or property by fraud
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I ha ans in c 18	ave read the answers on this <i>Statement</i> swers are true and correct. I understand connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 3571. S/s/JoAnn White Signature of Debtor 1 Date 11/29/2018	that making a false statement, concealing pro result in fines up to \$250,000, or imprisonment Signature of Debtor 2	perty, or obtaining money or property by fraud for up to 20 years, or both.
I ha ans in c 18	ave read the answers on this <i>Statement</i> swers are true and correct. I understand connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 3571. S/s/JoAnn White Signature of Debtor 1 Date 11/29/2018	that making a false statement, concealing pro result in fines up to \$250,000, or imprisonment Signature of Debtor 2 Date	perty, or obtaining money or property by fraud for up to 20 years, or both.
Dice	ave read the answers on this <i>Statement</i> swers are true and correct. I understand connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 3571. Syloann White Signature of Debtor 1	that making a false statement, concealing pro result in fines up to \$250,000, or imprisonment Signature of Debtor 2 Date	perty, or obtaining money or property by fraud for up to 20 years, or both. In a second seco

JoAnn White

Debtor 1

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Fill in this in	formation to identi	fy your case:	
Debtor 1	JoAnn White First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Sankruptcy Court for th	e: Western District	Of Pennsylvania
Case number (If known)	18-24394		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
accaining accai	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occurring doos.	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☐ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

12/15

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Your	name

JoAnn White
First Name Middle Name

Last Name

Case number (If known) 18-24394

Describe your unexpired personal property lea	any unexpired personal property lease that you listed in <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Official Form 106G), in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet lead. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).				
essor's name:	ases	Will the lease be assumed?			
		□ No			
Description of leased roperty:		☐ Yes			
essor's name:		□ No			
Description of leased property:		☐ Yes			
essor's name:		□ No			
Description of leased property:		Yes			
essor's name:		□ No			
Description of leased property:		Yes			
essor's name:		□ No			
Description of leased roperty:		Yes			
essor's name:		□ No			
Description of leased property:		☐ Yes			
essor's name:		□ No			
Description of leased property:		☐ Yes			
•					
s/JoAnn White	<u> </u>				
ignature of Debtor 1	Signature of Debtor 2				

Case 18-24394-TPA Doc 10 Filed 11/29/18 Entered 11/29/18 15:11:17 Desc Main Fill in this information to identify your case: Check one box only as directed in this form and in Form 122A-1Supp: JoAnn White Debtor 1 First Name Middle Name 1. There is no presumption of abuse. Debtor 2 (Spouse, if filing) First Name Middle Name Last Name 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 WESTERN DISTRICT OF PENNSYLVANIA United States Bankruptcy Court for the: Means Test Calculation (Official Form 122A-2). 18-24394 Case number 3. The Means Test does not apply now because of (If known) qualified military service but it could apply later. Check if this is an amended filing 53.067.00 Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. **Calculate Your Current Monthly Income** Part 1: 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. ■ Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, Debtor 1 Debtor 2 or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Copy 0.00 Net monthly income from a business, profession, or farm \$0.00 6. Net income from rental and other real property Debtor 1 Debtor 2 \$ Gross receipts (before all deductions) Ordinary and necessary operating expenses Copy 0.00 Net monthly income from rental or other real property 00.020.00 7. Interest, dividends, and royalties

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	oAnn White		Case number	er (if known)18	-24394	
FII	irst Name Middle Name Last Name					
			Column Debtor 1		Column B Debtor 2 or non-filing spouse	
8. Unemploy	yment compensation		\$	0.00	\$	
under the	ter the amount if you contend that the amount i Social Security Act. Instead, list it here:	Ψ				
_	1					
,	ır spouse	Ψ				
benefit un	or retirement income. Do not include any amoder the Social Security Act.		\$	38.21	\$	
Do not inc as a victim	rom all other sources not listed above. Spec clude any benefits received under the Social Se n of a war crime, a crime against humanity, or in If necessary, list other sources on a separate p	ecurity Act or payments receiventernational or domestic	ed			
			\$		\$	
			\$		\$	
Total am	ounts from separate pages, if any.		+ \$	0.00	+ \$	
	your total current monthly income. Add line then add the total for Column A to the Column A to the total for Column A to the total for Column A to t		\$	38.21	+	\$
Part 2: Do	etermine Whether the Means Test App	olies to You				monthly income
12. Calculate	your current monthly income for the year. F	Follow these steps:				
12a. C op	by your total current monthly income from line 1	1		Co	py line 11 here	\$38.21
Mul	tiply by 12 (the number of months in a year).				_	x 12
12b. The	e result is your annual income for this part of the	e form.			12b.	\$\$
13. Calculate	the median family income that applies to yo	ou. Follow these steps:				
Fill in the	state in which you live.	Pennsylvania				
Fill in the r	number of people in your household.	1			Г	
To find a li	median family income for your state and size or list of applicable median income amounts, go on so for this form. This list may also be available a	nline using the link specified in	the separat		13.	\$ 53,067.00
14. How do th	he lines compare?					
	ine 12b is less than or equal to line 13. On the Go to Part 3.	top of page 1, check box 1, Th	here is no pr	esumption	า of abuse.	
	ine 12b is more than line 13. On the top of pag Go to Part 3 and fill out Form 122A–2.	e 1, check box 2, The presum	ption of abu	se is dete	rmined by Form 122A	1-2.
Part 3: S	ign Below					
Ву	y signing here, I declare under penalty of perjur	y that the information on this s	tatement an	d in any a	ttachments is true an	nd correct.
5	⟨ /s/JoAnn White	×				
	Signature of Debtor 1	Si	ignature of De	btor 2		
	Date 11/29/2018	D	ate	12000	_	
	MM / DD / YYYY		MM / DE) /YYYY		
	If you checked line 14a, do NOT fill out of the state of		orm .			

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court WESTERN DISTRICT OF PENNSYLVANIA

[n	re 、	JoAnn White	
		Case No. <u>18-24394</u>	_
De	btor	Chapter 7	
		DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR	
1.	nan ban	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the a med debtor(s) and that compensation paid to me within one year before the filing of the petition in nkruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debt ntemplation of or in connection with the bankruptcy case is as follows:	n
	For	or legal services, I have agreed to accept\$0.00	
	Pri	ior to the filing of this statement I have received	_
	Bal	lance Due	
2.	The	ne source of the compensation paid to me was:	
		Debtor Other (specify)	
3.	The	ne source of compensation to be paid to me is:	
		Debtor Other (specify)	
4.		I have not agreed to share the above-disclosed compensation with any other person unless members and associates of my law firm.	hey are
		I have agreed to share the above-disclosed compensation with a other person or persons who members or associates of my law firm. A copy of the agreement, together with a list of the name people sharing in the compensation, is attached.	
5.		return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankse, including:	cruptcy
	a.	Analysis of the debtor's financial situation, and rendering advice to the debtor in determining value a petition in bankruptcy;	vhether to
	b.	Preparation and filing of any petition, schedules, statements of affairs and plan which may be re-	equired;
	c.	Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjo hearings thereof:	urned

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e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

November 29, 2018

/s/MeghanM.Tighe

Date

Signature of Attorney

Neighborhood Legal Services Association

Name of law firm